



CITY OF WILLIAMSBURG

Police Department

Application for Employment

* PERSONAL *

Name: _____ Date: _____
Last First MI Soc. Sec.: _____
Date of Birth: _____
Address: _____ Home Phone: _____
Work Phone: _____

Race: _____ **Sex: _____ **For Statistical Purposes only

Position(s) Applied for: _____

Are you currently a law enforcement officer: Yes _____ No _____

Are you currently meeting your financial obligations: Yes _____ No _____

* LEGAL *

Have you ever been charged and/or convicted of any criminal charge whether felony or misdemeanor: Yes _____ No _____

**** If the answer to the above question is yes, attach a detailed explanation including date, place, charge, and final disposition to this application. ****

Return this application by e-mail, fax, or mail to:

Williamsburg Police Department
Support Services Bureau
425 Armistead Avenue
Williamsburg, Virginia 23185-3651

Applications are retained for a period of 1 year from the date on the Application. An updated application must be completed after one year.

The City of Williamsburg does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment for the provision of services. **REV 04/01 3101-0320**

*** EDUCATION ***

List your highest level of education including the name of the school, location, field of study, and any degree(s).

*** EMPLOYMENT ***

To / From	Employer	Address	Position	Supervisor	Phone	Reason for Leaving

In your own words, why are you seeking employment with the Williamsburg Police Department.

Williamsburg Police Department employees will not smoke nor utilize smoking materials or tobacco considered as dangerous within the frame work of controlled substances statutes on or off duty.

*** AFFIDAVIT ***

I hereby certify that all statements contained in this Employment Application are true and complete to the best of my knowledge. I have neither withheld nor misrepresented any facts contained herein. I also understand that any willful omissions or misstatement of material facts may be grounds for rejection of my application or dismissal from City employment.

Signature

Date

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